CALIFURNIA LIQUID WASIE HAULEK KECUKU

012-011718

STATE WATER RESOURCES CONTROL BOARD STATE DEPARTMENT OF HEALTH

					SFUND RECORDS CTR
Name William N	1111 111	11 F 13 M	ar so i ca		ASBURY OIL CO. 999000313
Name (PRINT OR TYPE) Pick up Address: (SYREET) (RUTHER (CA) (RUTHER (C					13419 Halidale Ave., Gardene, California 90249
(NUMBER) (STREET) (CITY)					Phone: (213) 321-1392
Telephone Number: (2/2) (16) P.O. or Contract No.: 40/4 96					Pick Up: 4-19-80 Time:pm
Order Placed By:	ACKEN.		Dete:Z	-17-50	State Liquid Waste Hauler's Registration No. (if applicable):
Type of Process				,	Job No.: No. of Loads or Trips: Unit No
which Produced Wastes:	Examples: metal			drilling — CODE NO.	Vehicle: ☑ vecuum truckberrels, ☐ flatbed, ☐ other
	wastewater treatm				The described waste was hauled by me to the disposal
	- Johnson S				facility named below and was accepted.
Check type of wastes:					i certify (or declare) under penalty of perjury
1. Acid solution					that the foregoing is true and correct.
2. Alkaline solution				•	
3. Pesticides					(VIII)
4. Paint sludge					Name (print or type): OCH 14 19 10/19 CODE NO.
5. Solvent	10. Drilling	mud	15. 🗆 Brir	1 6	Site Address:
Other (Specify)	MINAMA C	7 10 10	1.0. 54	7 (-1)	The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Heelth regulations, and
Components: (Examples: Hydrochloric aci			./ Concent	CODE NO.	local restrictions.
phenolics, solvents (list), met organics (list), cyanide)		Up _l		% ppm	Quantity measured at site (if applicable):State fee (if any):
organics (list), cyanice)					Handling Method(s):
1.					recovery
2.					
3.					treatment (specify):
4.	V				☐ disposel (specify): ☐ pond ☐ spreeding ☐ fandf] ☐ ☐ injection well
5.					Li other (specify):
			_ —		If waste is held for disposal elsewhere specify final location:
0.			-		Disposal Date:
Hazardous Properties of War		☐ flammable	☐ corrosi	ve 🗀 explosive	I certify (or declars) under penalty of perjury that the foregoing is true and correct.
pn_/_/_ L no	TOXIC	U TISMMEDIO	L COTTOSI	ve 🗀 expresive	MENATURE OF AUTHORIZED AGENT AND TITLE
Bulk Volume:		☐ tons	barreis 4 (42 gal.)	other (SPECIFY)	The site operator shall submit a legible copy of each completed Record to the State Department of
			_	ا د در	Hesith with monthly fee reports.
Containers:	drums	Cartons [] bags	other / / N/K	
Shoulant Seese	D solid	liquid i	3		·√ / // /
Physical State:	□ \$011 a	a liquia	i sludge	otherspecify}	COPY TRACED FROM LEGIBLE DOC. 3/92
Special Handling Instruction	s (if any):				COPT TRACES TROM
		NE		· · · · · · · · · · · · · · · · · · ·	
					. K001242
The weste is described to the applicable).	best of my ability	and it was delive	ered to a licens	ed liquid waste hauler (if	
appricable). I certify (or declare) under p	ensity of periory				FOR INFORMATION RELATED TO PILLS OR OTHER EMERGENCIES INVOLVING
that the foregoing is true and correct.					HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.
			18 1 1 10	\cup , \nearrow \subset \bigcirc	
		BIGNATU	RE OF AUTHORIS		D.O.T. Proper Shipping Name
			43	A Joseph	DISPOSAL - STATE COPY